

S&H Form: PTO/SB/50 (6/00)

REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents Box Patent Application Washington, DC 20231

Attention: BOX REISSUE

Attorney Docket No.	1293.1143RE	
First Named Inventor	Soon Sun SHIM	
Original Patent Number	5,819,002	
Original Patent Issue Date	October 6, 1998	· ,
Express Mail Label No.		

APPLI	ICA	NOIT	FOR	REISSU	JE OF:

(check applicable box)

[X] Utility Patent

[] Design Patent

[] Plant Patent

APPLICATION ELEMENTS

- 1. [X] Fee Transmittal Form (PTO/SB/56)
- 2. [X] Specification and Claims (amended, if appropriate)
- 3. [X] Drawing(s) (proposed amendments, if appropriate)
- 4. [X] Reissue Oath/Declaration (original or copy) (37 CFR 1.175)(PTO/SB/51 or 52)
- 5. Original U.S. Patent

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[X] Offer to Surrender Original Patent (37 CFR 1.178)(PTO/SB/53 or 54) or

[]

- Ribboned Original Patent Grant [] Affidavit/Declaration of Loss (PTO/SB/55)
- 6. Original U.S. Patent currently assigned?
 - Yes [] No (If Yes, check applicable box(es), below)
 - [X] Written Consent of all Assignees (PTO/SB/53 or 54)
 - [X] 37 CFR 3.73(b) Statement
- [] Power of Attorney

ACCOMPANYING APPLICATION PARTS

- 7. [X] Transfer drawings from Patent File
- 8. [X] Foreign Priority Claim (35 USC 119) (if applicable) (Korean Appln. 1991 18211, filed 10/16/91, in original filing.)
- 9. [] Information Disclosure Statement (IDS)/PTO-1449 and [] Copies of IDS Citations
- 10. [] English Translation of Reissue Oath/Declaration (if applicable)
- 11. [] Small Entity Statement(s)
- [] Statement filed in prior application. status still proper and desired.
- 12. [] Preliminary Amendment
- 13. [X] Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- 14. [] Other:

15. CORRESPONDENCE ADDRESS



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		Attorney Docket No.	1293.1143RE				
REISSUE APPLICATION FEE TRANSMITTAL		Application Number	USP 5,819,002				
		Filing Date	Issued: 10/6/98				
AMOUNT ENCLOSED	\$	First Named Inventor	Soon Sun SHIM				

FEE TRANSMITTAL			Application Number			USP 5,819,002							
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1	ims in atent	Fo	or	Number I Reissue Ap			Number Extra		Rate		Calculations		
(A)	7	TOTAL CLAII	мѕ	(B)	58(1) =	(1)	38	X \$	18.00 =	\$684.00		
(C)	2	INDEPENDE	NT CLAIMS	(D)	12(2) =	(2) 9 X			80.00 =	720.00		
	BASIC FILING FEE 710.00												
	Total of above Calculations = \$ 2,114.00												
		Reduction	by 50% for	filing by	small	entity (37	CFR 1.9, 1.2	7 & 1.2	28)				
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	(1) If the entry in (A) is greater than 20, use (B)-(A); if (A) is 20 or less, use (B)-20. (2) If the entry in (D) is less than the entry in (C), use "0".												
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[X]	[X] Check enclosed as payment.												
[]	[] Charge "TOTAL FILING FEE" to the Deposit Account No., below.												
	No payment is enclosed and no charges to the Deposit Account are authorized at this time.												
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[X]	[X] If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to:												
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	Deposit Account Name STAAS & HALSEY LLP												
[X]	[X] The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(b)) to maintain pendency hereof or of any such related application.												
SUB	MITTED	BY: STAA	S & HAL	.SEY L	LP								
	ed Name	Michael [a .//				F	Reg. No.	37,240			
								7./					

Signature © 2000 Staas & Halsey 10/5/00

Date